

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

RECEIVED

EMAIL
OCT 31 2007

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Litwiller For City Council

IMPORTANT: Indicate by # type of committee you are reporting for: 6

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Cindy Litwiller

Political Party (if applicable)

Office Sought

Council-Ward 3

District (if Senate or House)

FORM
DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. # _____

Logged In _____

Scanned _____

Computer _____

Audited _____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Janet Scott

SIGNATURE OF PERSON FILING REPORT

515-570-2129

TELEPHONE

10/31/07

DATE SIGNED

I AM FILING A November 1, 2007 REPORT FOR (1) ELECTION /(2) NON-ELECTION YEAR.

(report date)

Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

November 6, 2007

County & Local Committees, enter County in
which Election is held

Webster County

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

809.61

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

1990.00

Schedule F: Loans Received total (Attach Schedule F)

550.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

3349.61

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

2071.22

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (If final report balance must be zero)

1278.39

**UNPAID BILLS (From Schedule D - Attach Schedule D)

0

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

545.06

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

2050.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Litwiller For City Council

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/10/07	ID# CK#	Steven Daniel 2188 160 th St Fort Dodge, IA 50501		\$100. ⁰⁰	<input type="checkbox"/>
10/18/07	ID# CK#	Peggy Trevino 1936 Stadium Drive Fort Dodge, IA 50501		\$25. ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	Melvin Schroeder 1604 N 23 rd St Fort Dodge, IA 50501		\$25. ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	Steve Springer 1156 N 19 th Street Fort Dodge, IA 50501		\$50. ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	Dean Barnett 3018 20 th Ave N Fort Dodge, IA 50501		\$50. ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	Neven Mulholland 833 Northwood Ave Fort Dodge, IA 50501		\$100. ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	J P Mansfield 1625 5 th Ave South Fort Dodge, IA 50501		\$50. ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	Tom Miklo 424 N. 20 th St Fort Dodge, IA 50501		\$50. ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	L.C. Dencklau 2021 N. 14 th Ct - No.4 Fort Dodge, IA 50501		\$10. ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	Shari Fitzgerald 726 N 3 rd St Fort Dodge, IA 50501		200. ⁰⁰	<input checked="" type="checkbox"/>

SUB-TOTAL

\$660.⁰⁰

TOTAL (if last page of this schedule)

\$ N/A

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 3
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Litwiler for City Council

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10/18/07	ID# CK#	Rita Carlson 1306 S. 19th Street Fort Dodge, IA 50501		\$ 20 ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	Tom Payne 1906 N 17th Street Fort Dodge, IA 50501		\$ 50 ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	James Moench 704 Crest Avenue Fort Dodge, IA 50501		\$ 50 ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	James Kesterson 160 Parkwood Ct Fort Dodge, IA 50501		\$ 100 ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	Rich & LaVonne Jacobson 1640 N. 22nd Street Fort Dodge, IA 50501		\$ 200 ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	Unitemized Contributions "Pass the Hat"		\$ 560 ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	Joseph Lawler 2739 N 13th Place Fort Dodge, IA 50501		\$ 25 ⁰⁰	<input checked="" type="checkbox"/>
10/18/07	ID# CK#	Scott McQueen 2704 N 25th Street Fort Dodge, IA 50501		\$ 25 ⁰⁰	<input checked="" type="checkbox"/>
10/24/07	ID# CK#	Tom Tibbatts 1309 N 14th St Fort Dodge, IA 50501		\$ 100 ⁰⁰	<input type="checkbox"/>
10/24/07	ID# CK#	Susan Thompson 2820 N 25th St Fort Dodge, IA 50501		\$ 50 ⁰⁰	<input type="checkbox"/>
SUB-TOTAL				\$ 1180 ⁰⁰	
TOTAL (if last page of this schedule)				\$ N/A	

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(for Schedule A)

For Instructions, See Back of Form

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

**MONETARY
RECEIPTS**

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Litwiller for City Council

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/26/07	ID# CK#	Dee Haggard 1431 N. 31st St Fort Dodge, IA 50501		\$ 25 ⁰⁰	<input type="checkbox"/>
10/26/07	ID# CK#	Sondra Holmstrom 1729 River Forest Drive Fort Dodge, IA 50501		\$ 25 ⁰⁰	<input type="checkbox"/>
10/27/07	ID# CK#	Dennis Crimmins 2110 N 30th St Fort Dodge, IA 50501		\$ 100 ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$150⁰⁰

TOTAL (If last page of this schedule)

\$1990⁰⁰

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Litwiller for City Council

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/2/07	ID# CK#	Office Max 2950 5th Ave South Fort Dodge, IA 50501	Flyers	\$ 67.83
10/2/07	ID# CK#	Media Com 2nd Avenue South Fort Dodge, IA 50501	TV ads	\$ 35.00
10/3/07	ID# CK#	Creative Signs 2101 1st Ave N Fort Dodge, IA 50501	yd signs	\$ 207.97
10/10/07	ID# CK#	Office Max 2950 5th Ave South Fort Dodge, IA 50501	Flyers	\$ 569.16
10/10/07	ID# CK#	One of A Kind Signs 223 2nd St N.W. Fort Dodge, IA 50501	black signs	\$ 318.00
10/14/07	ID# CK#	US Post Office Drug Town location Fort Dodge, IA 50501	Stamps	\$ 61.50
10/12/07	ID# CK#	Creative Signs 2101 1st Ave N. Fort Dodge, IA 50501	sign changes	\$ 180.52
10/15/07	ID# CK#	Webster County Auditor 703 Central Avenue Fort Dodge, IA 50501	voter list	\$ 12.50
SUB-TOTAL				\$ 1422.48
TOTAL (If last page of this schedule)				\$ N/A

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

Page 1 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Litwiller for City Council

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/22/07	ID# CK#	US Post Office Maple Drive Fort Dodge, IA 50501	Stamps	\$41. ⁰⁰
10/24/07	ID# CK#	Messenger 713 Central Fort Dodge, IA 50501	Ads	\$66. ⁷⁵
10/24/07	ID# CK#	Messenger 713 Central Fort Dodge, IA 50501	Ads	\$190. ²⁶
10/25/07	ID# CK#	Capitol Promotions PO Box 231 Glenside, PA 19038	Yard signs	\$350. ⁷³
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$648.74

TOTAL (if last page of this schedule) \$2071.22

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Litwiler for City Council

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/10/07	Cindy Litwiler 107 N 32nd St Fort Dodge, IA 50501	SELF	Labels	\$ 9.52	<input checked="" type="checkbox"/>
10/16/07	Cindy Litwiler 107 N 32nd St Fort Dodge, IA 50501	self	name badges	\$ 12.66	<input checked="" type="checkbox"/>
10/8/07	Larry Leitfing 1503 12th Ave North Fort Dodge, IA 50501	N/A	Invitations & Food for fundraiser	\$ 118.22	<input checked="" type="checkbox"/>
10/18/07	Tom Kregel 723 Elizabeth Ave Fort Dodge, IA 50501	N/A	Invitations & food for fundraiser	\$ 118.22	<input checked="" type="checkbox"/>
10/18/07	Steve Daniel 2188 169th St. Fort Dodge, IA 50501	N/A	Invitations & food for fundraiser	\$ 118.22	<input checked="" type="checkbox"/>
10/18/07	Bob Bocken PO Box 1313 Fort Dodge, IA 50501	N/A	Invitations & food for fundraiser	\$ 118.22	<input checked="" type="checkbox"/>
10/05/07	Andy Fritz 1222 S 25th St Fort Dodge, IA 50501	N/A	Used boards for signs	\$ 50. ⁰⁰	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 545.⁰⁶

TOTAL (if last
page of this
schedule) \$ 545.⁰⁶

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Litwiler for City Council

Reset Form

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 1500

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable)	AMOUNT OF LOAN
10/10/07	Cindy Litwiler 107 N 32nd St Fort Dodge, IA 50501	SELF	\$ 350.00
10/12/07	Cindy Litwiler 107 N 32nd St Fort Dodge, IA 50501	SELF	\$ 200.00

TOTAL (PART I) \$ 550.00

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E - In-kind Contributions)

DATE PAID (MM/DD/YY)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (if Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II) \$ 0

From Schedule E - TOTAL LOANS FORGIVEN \$ 0

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 2050.00

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